

## **P-IRO Inc.**

**An Independent Review Organization**

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### ***Notice of Independent Review Decision***

**Case Number:**

**Date of Notice:** 07/05/2016

#### **Review Outcome:**

**A description of the qualifications for each physician or other health care provider who reviewed the decision:**

Pediatric Orthopedics And Orthopedic Surgery

#### **Description of the service or services in dispute:**

1. Right shoulder arthroscopy; manipulation under anesthesia; lysis of adhesions, debridement, subacromial decompression/acromioplasty, distal clavicle resection, and rotator cuff repair
2. DME purchase: shoulder abduction orthosis
3. DME rental: cryotherapy unit rental X 7 days

**Upon Independent review, the reviewer finds that the previous adverse determination / adverse determinations should be:**

- ☒ Upheld (Agree)
- ☐ Overturned (Disagree)
- ☐ Partially Overturned (Agree in part / Disagree in part)

#### **Patient Clinical History (Summary)**

The patient is a female. On XX/XX/XX, an MRI of the right shoulder was noted to reveal small partial tear at the insertion of supraspinatus tendon with additional tendinosis and subacromial/subdeltoid bursitis.

On XX/XX/XX, an EMG/NCV study of the upper extremities was noted to reveal electrodiagnostic evidence of moderate right median sensorimotor neuropathy in the wrist/palm; possible chronic axon loss left median neuropathy at an indeterminate site and isolated findings without definitive of very mild bilateral ulnar neuropathies at the elbow.

On X/XX/XX, the patient was seen for an evaluation regarding right arm pain, adhesive capsulitis of the shoulder, supraspinatus tear, and hyperesthesia. The patient was reportedly scheduled to undergo a right shoulder manipulation under anesthesia, lysis of adhesions, arthroscopic debridement, subacromial decompression, acromioplasty, distal clavicle resection, and rotator cuff repair. The physical examination of the shoulders revealed tenderness of the acromioclavicular joint and bicipital groove on the right with tenderness of the supraspinatus, subacromial bursa, subdeltoid bursa, and lateral cuff insertion. Additionally, range of motion of the right shoulder was demonstrated with forward flexion to 80 degrees, extension to 60 degrees, external rotation at 0 degrees of abduction to 20 degrees, and internal rotation L5 with abduction 65 degrees with positive Hawkins, Neer's, and O'Brien's tests and 4/5 motor strength. It was also noted that the patient had decreased sensation of the 4th and 5th digits, ulnar hand, distal forearm, and ulnar forearm and hand. The treatment plan included surgical intervention of the right shoulder with continued light duty.

***Analysis and Explanation of the Decision include Clinical Basis, Findings and Conclusions used to support the decision.***

Per the submitted documentation, the patient complained of continued pain of the right shoulder. An MRI of the right shoulder, dated XX/XX/XX, was noted to reveal small partial tear at the insertion of supraspinatus tendon with additional tendinosis and subacromial/subdeltoid bursitis. Additionally, an EMG/NCV of the upper extremities dated XX/XX/XX, was noted to revealed moderate right median sensorimotor neuropathy in the wrist/palm; possible chronic axon loss left median neuropathy at an indeterminate site and isolated findings without definitive of very mild bilateral ulnar neuropathies at the elbow. On the most recent physical examination, there was tenderness of the acromioclavicular joint and bicipital groove on the right with tenderness of the supraspinatus, subacromial bursa, subdeltoid bursa, and lateral cuff insertion. Range of motion of the right shoulder was demonstrated with forward flexion to 80 degrees, extension to 60 degrees, external rotation at 0 degrees of abduction to 20 degrees, and internal rotation L5 with abduction 65 degrees with positive Hawkins, Neer's, and O'Brien's tests and 4/5 motor strength. However, there was no documentation with evidence of pain with active arc motion 90 to 130 degrees. Additionally, there was no indication of deficits of the AC joint found on MRI to warrant the requested distal clavicle resection surgery. There were no exceptional factors to warrant manipulation under anesthesia of the right shoulder, as it is not recommended per the evidence based guidelines. Furthermore, there was a lack of documentation with evidence of failure and exhaustion of conservative treatment prior to the requested surgical procedure. As the concurrent request for surgical intervention was deemed not medically necessary, the requested postoperative treatments with shoulder abduction orthosis and cryotherapy unit times 7 days is not medically necessary. Therefore, the requested right shoulder arthroscopy, manipulation under anesthesia, lysis of adhesions, debridement, subacromial decompression/acromioplasty, distal clavicle resection, and rotator cuff repair; DME purchase: shoulder abduction orthosis; and DME rental: cryotherapy unit rental times 7 days is not medically necessary and the prior determination is upheld.

***A description and the source of the screening criteria or other clinical basis used to make the decision:***

- ☐ ACOEM-America College of Occupational and Environmental Medicine um
- ☐ knowledgebase AHCPR-Agency for Healthcare Research and Quality Guidelines
- ☐ DWC-Division of Workers Compensation Policies and Guidelines
- ☐ European Guidelines for Management of Chronic Low Back Pain
- ☐ Interqual Criteria
- ☒ Medical Judgment, Clinical Experience, and expertise in accordance with accepted medical
- ☐ standards Mercy Center Consensus Conference Guidelines
- ☐ Milliman Care Guidelines
- ☒ ODG-Official Disability Guidelines and Treatment
- ☐ Guidelines Pressley Reed, the Medical Disability Advisor
- ☐ Texas Guidelines for Chiropractic Quality Assurance and Practice
- ☐ Parameters Texas TACADA Guidelines
- ☐ TMF Screening Criteria Manual
- ☐ Peer Reviewed Nationally Accepted Médical Literature (Provide a description)
- ☐ Other evidence based, scientifically valid, outcome focused guidelines (Provide a description)